learn about the life and works of Chavez annually through civic engagement.

On March 30, 2001, the Governor's Office on Service and Volunteerism commemorated the first annual Cesar Chavez Day of Service and Learning by involving K-12 students in service and teaching children about the life and work of Cesar E. Chavez. Individuals. business and community members, teachers and school children came together to perform meaningful service projects to honor the principles by which Chavez conducted his life. GO SERV awarded grants to 71 projects which performed community activities, such as community garden projects, mural painting, theater/teatro performances, environmental restoration projects, community beautification activities, and agricultural/farmworker projects. As a result of these partnerships, over 300,000 students engaged in service activities to honor Cesar E. Chavez.

One striking example was a program in Orange County. At the Orange County Cesar Chavez Day initiative, over 500 4th grade students participated in gleaning fields and harvesting crops. All of the food gathered was donated to the Second Harvest Food Bank which distributed the food locally. Over 25,000 pounds of cabbage, radishes, carrots, onions, romaine, iceberg and butter lettuce was gathered as a result of the program. In addition to gathering food, students planted over 800 seedlings. In June, the program will engage over 400 additional 4th grade students in the program to harvest crops for donation to the Food Bank. The activities are a fitting introduction for students to the life and work of Cesar E. Chavez.

Another program called Barrios Unidos, a nonprofit organization dedicated to violence prevention, developed Cesar Chavez service clubs to commemorate Cesar Chavez Day. Barrios Unidos commemorated the day in seven sites statewide including Santa Cruz, San Mateo, Salinas, Fresno, Santa Monica, Venice, and San Diego. Through these Cesar Chavez clubs, youth participated in community beautification projects while learning about the life and values of Chavez. In Santa Monica for example, people joined to celebrate the day by cleaning up Virginia Avenue Park and painting a 20-foot long mural depicting city life.

GO SERV worked in conjunction with Senator Richard Polanco's office, the Cesar E. Chavez Foundation, the Chavez family, and the Department of Education to promote the first annual Cesar Chavez Day of Service and Learning. We are proud of the undertakings of the first annual Cesar Chavez Day of Service and Learning and look forward to continuing to seeing the impact GO SERV will have in our community while commemorating and teaching Californians about the legacy of Cesar E. Chavez

WOMEN AND CHILDREN IN AMERICA DENIED VITAL MEDICAL AND FOOD BENEFITS BECAUSE OF IMMIGRATION STATUS

SPEECH OF

## HON. SILVESTRE REYES

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES Monday, June 25, 2001

Mr. REYES. Mr. Speaker, I am here to convey my strong support for the "Healthy Solu-

tions for America's Hardworking Families" package developed to provide critical health, nutrition, and protection benefits to legal permanent resident children and women. This package includes three pieces of legislation that take steps to address some of the most blatant gaps in our nation's effort to help those legally here in our country in times of greatest need.

As Chair of the Congressional Hispanic Caucus and as a Member whose district includes a large Hispanic community, one of my top priorities is to advocate for the fair treatment of hard-working, tax paying families. The Immigrant Children's Health Protection Improvement Act, H.R. 1143, gives States the option of providing basic health care coverage to legal permanent resident children and pregnant women who arrived in the U.S. after August 22, 1996. As a result of the 1996 reforms, lawfully present children and pregnant women who arrived in the US after 1996 must wait five years before they can apply for basic health care.

Because many of these recent immigrants are concentrated in low-paying, low-benefit jobs, these hard-working, tax-paying families, like so many citizens in our country, simply cannot afford private health care coverage. Thus, this vulnerable population cannot obtain proper health treatment such as preventative and prenatal care. Many are forced to delay care and rely on emergency room services to receive treatment. I believe this is an unacceptable risk for any American, as well as for current legal immigrants and their future American children.

The Congressional Budget Office estimated last year that this legislation would provide coverage to insure 130,000 children and 50,000 mothers per year who have followed the rules and are in this country legally. In light of the fact that the Hispanic population is the most uninsured in our country, with over 33 percent having no coverage, this legislation is a critical step in meeting this need.

A second component of this package is the Nutrition Assistance for Working Families and Seniors Act, H.r. 2142, which would permit qualified legal immigrants to obtain food stamps regardless of their date of entry. The majority of those impacted would be in low-income families with children and elderly. I have seen first hand, in my district, the detrimental affects of hunger and under-nutrition. Hungry children are more likely to suffer from adverse health effects and studies show that hunger has a negative impact on a child's ability to learn. Furthermore, pregnant women who are undernourished are more likely to have children with low birth weights, Likely leading to developmental delays.

This important bipartisan legislation is widely supported and endorsed by many, including the National Conference of State Legislatures, National Association of Counties, U.S. Conference of Mayors, and the National Governor's Association. Restoring this component of our nation's safety net system is not only critical step toward ending hunger in our country, it is just simply the right thing to do.

Finally, the third bill in the Healthy Solutions package is the Women Immigrant's Safe Harbor Act, H.R. 2258, which would allow legal immigrants who are victims of domestics violence to apply for critically needed safety services. These victims are frequently economically dependent on their abusers and isolated

from their support networks. I believe we must do everything we can to support victims of abuse and get them on a path toward a better life

Mr. Speaker, restoring Medicaid and SCHIP, nutrition, and protection services to this group is simply good public policy, but more importantly, the provisions in the "Healthy Solutions for America's Hardworking Families" packages can mean the difference between life and death. We cannot let these children and mothers down. I urge my colleagues to support this important package.

WOMEN AND CHILDREN IN AMERICA DENIED VITAL MEDICAL AND FOOD BENEFITS BECAUSE OF IMMIGRATION STATUS

SPEECH OF

## HON. SOLOMON P. ORTIZ

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES Monday, June 25, 2001

Mr. ORTIZ. Mr. Speaker, I commend my colleague from Texas for organizing this Special Order to bring the attention of the House of Representatives to the state of health care—or lack thereof—along the Southwest Border of the United States.

I represent a South Texas district that abuts the international border with Mexico. This part of the country is unique in so many ways, including the health needs and rampant poverty. Currently, the greatest health need in my district is the need for a comprehensive response to the rampant spread of tuberculosis in South Texas and elsewhere along the Southwest Border.

Just today, the Centers for Disease Control announced that the rate of tuberculosis cases in Brownsville, Texas, is nearly five times the national rate.

At least one doctor in the South Texas area has told me that there is a particularly frightening multiple-drug resistant form of tuberculosis that antibiotics just won't kill. I am told that this is spreading fast and is a nightmare for public health officials. It's an enormous problem. Cross-border dwellers, according to the medial community, are not good about following up on medical care and often do not finish drug therapies such as antibiotics. If you only take a little bit of antibiotics, it only takes care of a little bit of the problem and leaves the tuberculosis strong enough to come back again another day.

I supported a resolution in the House that recognizes the importance of substantially increasing United States investment in international tuberculosis control in the Fiscal year 2002 foreign aid budget, which is what it will take to deal with the problem. This resolution also recognizes the importance of supporting and expanding domestic efforts to eliminate tuberculosis in the United States and calls on local, national and world leaders, including the President, to commit to putting an end to the worldwide tuberculosis epidemic.

But as we all know, resolutions have no affect of law; they are merely words on paper on which all of us can agree. But the most fundamental job of Congress is to determine spending priorities, and we will not move forward on finding solutions to this problem without the full attention of Congress and other public policymakers.